

<input type="checkbox"/> SUMMONS FOR DEFENDANT <input checked="" type="checkbox"/> SUMMONS FOR WITNESS	DOCKET NUMBER 0750CR001348	Trial Court of Massachusetts District Court Department	
SESSION: <input checked="" type="checkbox"/> CRIMINAL <input type="checkbox"/> JUVENILE <input type="checkbox"/> JURY <input type="checkbox"/> MAGISTRATE HEARING NAME, ADDRESS AND ZIP CODE OF DEFENDANT Commonwealth vs. [REDACTED] NAME, ADDRESS AND ZIP CODE OF WITNESS Corbett and Renczkowski, Analyst DPH State Lab 305 SOUTH STREET BOSTON, MA 02130 [REDACTED] DATE ANALYZED: 8/28/2007		NAME AND ADDRESS OF COURT DIVISION Malden District Court 89 Summer Street Malden, MA 02148	YOU MUST APPEAR AT THIS COURT ADDRESS ON THE DATE AND TIME SPECIFIED HEREIN
<div style="text-align: center; font-size: 1.5em; font-weight: bold;"> PLEASE CANCEL ALL </div>		DATE AND TIME OF APPEARANCE October 8, 2009 at 8:45 AM PLEASE CANCEL	
		OFFENSE(S) CONSPIRACY TO VIOLATE DRUG LAW c94C §40, DRUG, POSSESS CLASS A c94C §34,	

TO ANY PERSON AUTHORIZED TO SERVE CRIMINAL PROCESS IN THE COMMONWEALTH

You are hereby commanded to forthwith serve the annexed summons upon the defendant or witness named within by delivering it to the defendant or witness personally, or by leaving it at the dwelling house or usual place of abode of the defendant or witness with some person of suitable and discretion then residing therein, or by mailing it to the last known address of the defendant or witness.

NOTE: A summons for a witness may also be served by any person authorized to serve a summons in a civil action. See Rule 17(d)(1) of the Massachusetts Rules of Criminal Procedure.

To the above named ☐ Defendant ☒ Witness:

You are hereby ordered to appear in this Court on the appearance date noted above.

- ☐ To answer to a criminal complaint charging with the offenses listed above.
☒ To give evidence and testify on the behalf of the ☒ Commonwealth ☐ Defendant
in the matter described above, and to appear from time to time and day to day
thereafter as ordered. You are further required to bring with you:

If you have any questions, please call Assistant District Attorney SARAH KENNEDY at 781-897-8675 OR 781-897-8755

DATE OF ISSUE	DISTRICT ATTORNEY
October 6, 2009	Gerard T. Leone, Jr.

RETURN OF SERVICE

I hereby certify that I served the within summons upon the above named ☐ Defendant ☒ Witness by

- ☐ Delivering a copy of it personally to the defendant or witness.
☐ Leaving a copy of it at the dwelling house or usual place of abode of the defendant or witness with a person of suitable age and discretion residing therein.
☐ Mailing a copy of it to the last known address of the defendant or witness.
☐ I received the summons on _____ but was unable to make service because: _____

DATE RECEIVED

DATE OF SERVICE	SIGNATURE OF PERSON MAKING SERVICE	TITLE OF PERSON MAKING SERVICE

WARNING TO DEFENDANT OR WITNESS:

**Failure To Appear In Accordance With This Summons May Result In The Issuance Of A Warrant For Your Arrest.
Please Bring This Document With You To Court.**

Atencion:

Esta Es Una Notificación Oficial De La Corte. Si Usted No Sabe Leer Inglés, Obtenga Traducción!

- ☐ Original Copy ☐ Duplicate Copy